

00/20/20  
15504 U.S. PTO

02-04-00 A

Please type a plus sign (+) inside this box → Approved for use through 09/30/2000. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No.	SAN01-NP001
First Inventor or Application Identifier	SAN ANTONIO, James D.
Title	Peptides Modulating Activities of Heparin, Other Glycosaminoglycans or Proteoglycans
Express Mail Label No.	EE 388 356 092 US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1.  Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2.  Specification [Total Pages **60**] (preferred arrangement set forth below)
  - Descriptive title of the Invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to Microfiche Appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
3.  Drawing(s) (35 U.S.C. 113) [Total Sheets **10**]
4. Oath or Declaration [Total Pages **3**]
  - a.  Newly executed (original or copy)
  - b.  Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)
    - i.  **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

**\*NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).**

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Continuation     Divisional     Continuation-in-part (CIP)    of prior application No: \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Group / Art Unit: \_\_\_\_\_

**For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**17. CORRESPONDENCE ADDRESS**

Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or  Correspondence address below

Name	Clifford Kent Weber, Esq.				
Address	Thomas Jefferson University - Office of University Counsel 1020 Walnut Street - Suite 620				
City	Philadelphia	State	PA	Zip Code	19107-5587
Country	Philadelphia	Telephone	(215) 503-0757	Fax	(215) 923-3613

Name (Print/Type)	Clifford Kent Weber	Registration No. (Attorney/Agent)	42,215
Signature	<i>Clifford Kent Weber</i>	Date	2/2/2000

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>STATEMENT CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) &amp; 1.27(d))—NONPROFIT ORGANIZATION</b>		Docket Number (Optional) <b>SAN01-NP001</b>
Applicant, Patentee, or Identifier: <u>Thomas Jefferson University</u>		
Application or Patent No.: <u>Not Known</u>		
Filed or Issued: <u>Not Known</u>		
Title: <u>Peptides Modulating Activities of Heparin, Other Glycosaminoglycans or Proteoglycans</u>		
I hereby state that I am an official empowered to act on behalf of the nonprofit organization identified below:		
NAME OF NONPROFIT ORGANIZATION <u>Thomas Jefferson University</u>		
ADDRESS OF NONPROFIT ORGANIZATION <u>1020 Walnut Street Suite 630</u>		
<u>Philadelphia, PA 19107</u>		
TYPE OF NONPROFIT ORGANIZATION:		
<input checked="" type="checkbox"/> UNIVERSITY OR OTHER INSTITUTION OF HIGHER EDUCATION		
<input type="checkbox"/> TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 U.S.C. 501(a) and 501(c)(3))		
<input type="checkbox"/> NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA (NAME OF STATE _____) (CITATION OF STATUTE _____)		
<input type="checkbox"/> WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 U.S.C. 501(a) and 501(c)(3)) IF LOCATED IN THE UNITED STATES OF AMERICA		
<input type="checkbox"/> WOULD QUALIFY AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA (NAME OF STATE _____) (CITATION OF STATUTE _____)		
I hereby state that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 CFR 1.9(e) for purposes of paying reduced fees to the United States Patent and Trademark Office regarding the invention described in:		
<input checked="" type="checkbox"/> the specification filed herewith with title as listed above. <input type="checkbox"/> the application identified above. <input type="checkbox"/> the patent identified above.		
I hereby state that rights under contract or law have been conveyed to and remain with the nonprofit organization regarding the above identified invention. If the rights held by the nonprofit organization are not exclusive, each individual, concern, or organization having rights in the invention must file separate statements as to their status as small entities and that no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).		
Each person, concern, or organization having any rights in the invention is listed below:		
<input checked="" type="checkbox"/> no such person, concern, or organization exists. <input type="checkbox"/> each such person, concern, or organization is listed below.		
I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))		
NAME OF PERSON SIGNING <u>Alan B. Kelly</u>		
TITLE IN ORGANIZATION OF PERSON SIGNING <u>University Counsel</u>		
ADDRESS OF PERSON SIGNING <u>1020 Walnut Street Suite 630 Philadelphia, PA 19107</u>		
SIGNATURE <u>[Signature]</u> DATE <u>2/2/00</u>		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL

## for FY 1999

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

TOTAL AMOUNT OF PAYMENT (\$ 3,645.00)

## Complete if Known

Application Number	Not Known
Filing Date	
First Named Inventor	
Examiner Name	
Group / Art Unit	
Attorney Docket No.	SAN01-NP001

## METHOD OF PAYMENT (check one)

1.  The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 50-0491  
Deposit Account Name Thomas Jefferson University

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

2.  Payment Enclosed:

Check  Money Order  Other

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 760	201 380	Utility filing fee	380
106 310	206 155	Design filing fee	
107 480	207 240	Plant filing fee	
108 760	208 380	Reissue filing fee	
114 150	214 75	Provisional filing fee	
SUBTOTAL (1) (\$)			380

## 2. EXTRA CLAIM FEES

Extra Claims	Fee from below	Fee Paid
Total Claims 75 -20** = 55	x 9	= 495
Independent Claims 70 -3** = 67	x 39	= 2,590
Multiple Dependent		

\*\*or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 78	202 39	Independent claims in excess of 3
104 260	204 130	Multiple dependent claim, if not paid
109 78	209 39	** Reissue independent claims over original patent
110 18	210 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)		

3,225.00

Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

40

Complete (if applicable)

Submitted By Typed or Printed Name	Clifford Kent Weber	Reg. Number	42,215
Signature	<i>Clifford Kent Weber</i>	Date	2/2/2000

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.